

## Return of Representatives

9.00

### Minutes

Receive minutes of 2015 Welsh Conference of Local Medical Committees as approved by the Chairman of Conference (Page 18)

### Standing Orders

Receive Standing Orders of the Welsh Conference of Local Medical Committees (Page 35)

### General Practitioners Committee (Wales)

Receive annual report from Dr Charlotte Jones, Chairman of GPC Wales

## Workforce

9.20 – 9.40

1*	North Wales	<p>That conference believes that the government should acknowledge the crisis in British General Practice and undertake the following measures urgently:</p> <ol style="list-style-type: none"><li>i. Make General Practice a shortage speciality under Home Office regulations, thus allowing appropriately trained doctors from outside the EEC to seek work in the UK - <b>PASS</b></li><li>ii. Establish what measures can be taken to arrest the haemorrhage of experienced practitioners from the profession - <b>PASS</b></li><li>iii. Enact the bureaucracy reducing measures that have been proposed for several years but have yet to be implemented - <b>PASS</b></li><li>iv. Restore the expenditure necessary to maintain high standards of doctor delivered General Practice. -<b>PASS</b></li></ol>
2	Dyfed Powys	<p>Commends the Welsh Government, Shared Services Partnership (SSP) and Local Health Boards (LHBs) for addressing the bureaucracy surrounding the performers list and request that they continue to work toward a streamlined and simplified process for accepting GPs onto performer's lists.</p>

3	Morgannwg	That conference demands Welsh Government should hold a single performers list for General Practice in Wales.
4	Bro Taf	That conference calls on the UK Government to include the recruitment of GPs from non EU countries in its immigration policy as a priority for a safe and sustainable service.
5	Bro Taf	That conference agrees that for more recruitment of the workforce and retaining the workforce the Welsh Government should provide extra financial incentives.
6	Gwent	That conference demands progress and action on a strategy for retaining experienced General Practitioners within the workforce in Wales.
7	Gwent	That conference demands that the government looks at voluntary exit interviews of GP practitioners at all levels, through retirement or moving out of the UK to inform objective measurable reasons for the haemorrhage and loss of resource.
8*	Bro Taf	<b>That conference requests GPC Wales to counter the unhelpful rhetoric from Welsh Government and other NHS bodies that promotes the myth that other health professionals will provide the answer to the recruitment and sustainability crisis in General Practice. - PASS</b>
9	North Wales	That conference recognises the necessity and benefits of increasing skill mix to maintain a primary care workforce.
10	North Wales	That conference calls for the recognition that training of non-doctor health care practitioners must include adequate learning about the skills necessary for provision of high quality primary care.
11	Morgannwg	That conference recognises the emergence of Physicians Associates within the primary care workforce but is concerned that they are viewed as a panacea to the workforce problems in the Welsh NHS.
12	Gwent	<b>That conference demands progress and action on a strategy for retaining and attracting more GP colleagues in Wales at all levels. - PASS</b>
13	Gwent	That conference demands Welsh Government action to reverse the trend of GP morale being at an all-time low.
123*	North Wales	<b>That conference believes that Welsh Government is oblivious to the crisis affecting General Practice in North Wales, as demonstrated by recent press statements, and calls on the First</b>

**Minister to urgently review the facts and retract his erroneous statement. - PASS**

124	Gwent	That the first minister publicly correct his mistaken statement in the Senedd that there are 2000 more GPs in Wales than 10 years ago and call on him to implement the Wales RCGPs target of 400 extra whole time equivalent GPs by 2020.
125	North Wales	That Conference believes that the recent press statement by the First Minister regarding the crisis in General Practice in North Wales demonstrates a complete failure of Welsh Government to react to warnings, repeated by the profession over the past 10 years, of impending manpower shortages and questions the commitment of the Government to provide high quality Primary Care to its people.
126	Gwent	That conference demands that our First Minister gives accurate information to the public with regards to the current disastrous situation about general practice and the perfect storm which is upon us in terms of general practice recruitment and retention.
14	Gwent	That conference demands robust monitoring and impact measurements on the contribution of allied health care practitioners to lessen the workload on General Practitioners.
15	Gwent	That conference demands action on a strategy for recruiting and training practice nurses in Wales

**Workload and resources  
9.40 – 10.00**

16*	Dyfed Powys	<b>Condemns Local Health Boards (LHBs) who are trying to reclassify enhanced service work as core GMS and requests GPC Wales to support LMCs and practices in their refusal to accept this unpaid work. - PASS</b>
17	Dyfed Powys	Supports practices who are “handing back” unfunded work to LHBs, despite pressure from LHB managers to continue to provide an un-resourced service.

**\*AC1**

**GPs are on their knees and the next generation are being scared off and many GPs are forced to accept ever growing lists until they surrender their contract in despair**

- i. **We need GPC to define and agree with the government a manageable safe workload - PASS**

- ii. **Introduce measures to stop GPs being forced to take patients above this level - PASS**
- iii. **Need to empower GPC to find urgent solutions to what GMS work can be safely stopped or suspended to try and rescue the struggling GP workforce - PASS**
- iv. **With an ageing population and ever expanding treatments, scarce GP services need to be protected and used wisely. - PASS**

18	North Wales	GPs are on their knees and the next generation are being scared off as they see us trying to manage 2000+ patients to NICE, QOF, enhanced services and growing government and public expectations. Many GPs are forced to accept ever growing lists until they surrender their contract in despair. We need GPC to define and agree with the government a manageable safe workload and introduce measures to stop GPs being forced to take patients above this level.
19	North Wales	Over the past 10 years workload for GPs has tripled and has now in many surgeries become a burden and incompatible with a healthy balanced family life. We need to empower GPC to find urgent solutions to what GMS work can be safely stopped or suspended to try and rescue the struggling GP workforce.
20	North Wales	With an ageing population and ever expanding treatments scarce GP services need to be protected and used wisely. We call on GPC and public health to urgently look at raising public awareness of the GP crisis, and encouraging self-management, other sources of advice/coping and wise use of GP time and a halting of the constant public and government mantra of 'if you're not sure go and see your GP'.
21*	North Wales	<b>Primary care can no longer manage ever increasing political and public demand with a shrinking workforce and decreasing income. With the ongoing pay freeze/cuts funding more staff is currently impossible for many surgeries. Conference demands an urgent uplift to surgery funding to recruit extra GPs/accessory staff to try and rescue primary care. - PASS</b>
22	North Wales	That conference seeks the re-establishment of the Medical Practice Committee, or similar, to ensure that primary care provision is spread across the UK in a way proportionate to population need. - <b>PASS</b>
23	Gwent	That conference urgently looks at 'last man standing' liabilities and support to avoid collapse of services. - <b>PASS</b>

24 Gwent That conference urges the public to be officially told the truth that with the current recruitment and retention crisis added to the oversaturated primary care workload, GPs are unable to deliver safe services to their patients. - **LOST**

**MPIG  
10.00 – 10.15**

25 North Wales That conference believes that the process of MPIG redistribution is affecting rural and multisite practices disproportionately and conference calls for the process to be halted pending a review of fair funding. – **LOST**

**GPC UK  
10.15 – 10.25**

122 Bro Taf THAT Conference calls upon Welsh GPC to reject the motion passed at the Special UK LMC Conference which reads "GPC should canvass GPs on their willingness to submit undated resignations.

**QOF  
(Themed debate)  
10.15 – 10.45**

**Question: Should GPC Wales negotiate the abolition of QOF in the GMS contract and for funding to be transferred into the global sum? – **LOST (Abolition Opposed)****

26 North Wales That conference calls for QOF (Quality and Outcomes Framework) to be abandoned, and for the funding to be transferred into global sum. - **LOST**

27 North Wales That conference believes that QOF (Quality and Outcomes Framework) is no longer serving a useful purpose and that the process of coding and monitoring is in fact a negative influence on patient care.

28 Morgannwg That conference believes the Quality and Outcomes Framework (QOF) is a misnomer and should be consigned to history.

29 Gwent That conference supports the reduction of QOF (Quality and Outcomes Framework) and that the trend of returning the money to global sum should be accelerated as the professionalism of General Practice has been proved repeatedly and does not need this repeated measurement. – **NOT REACHED**

**Key Note Speech  
Dr Richard Lewis  
10.45 – 11.05**

Coffee  
11.05 – 11.15

GP Clusters  
11.15 – 11.30

\*AC2

- Conference demands that Health Boards urgently act to
- i. Reduce bureaucracy and delay in releasing funding to clusters which currently compromises their ability to utilise earmarked funding and deliver services - **PASS**
  - ii. Work with GPs to develop an effective process to properly evaluate the evolving platforms for delivering cluster working, such as federations. - **PASS**
  - iii. Demands appropriate access to independent planning and financial experts to support development of clusters and intercluster working -**PASS**
  - iv. Adhere to the “light touch” approach to cluster network funding as envisaged by the Welsh Government
  - v. Suggests an independent survey of Welsh General Practitioners on their experience of network cluster groups. -**PASS**

30	Morgannwg	Conference demands that Health Boards urgently act to reduce bureaucracy and delay in releasing funding to clusters which compromises their ability to utilise earmarked funding and deliver services.
31	Morgannwg	That conference calls on Welsh Government and Health Boards to work with GPs to develop an effective process to properly evaluate the evolving platforms for delivering cluster working, such as federation.
32	Gwent	That conference demands appropriate access to independent planning and financial experts to support development of clusters and intercluster working.
33	North Wales	That conference calls for Health Boards to adhere to the “light touch” approach to Cluster Network funding as envisaged by the Welsh Government.
34	Gwent	That conference suggests an independent survey of Welsh General Practitioners on their experience of network cluster groups.
35*	Morgannwg	<b>That conference believes that there is still a great deal of ambiguity regarding clusters and the direction of travel and that</b>

**there is a significant risk that they will be “talking shops” with no real power to reconfigure services or care. - PASS**

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|----|-----------|---|
| 36 | Bro Taf   | That conference urges GPC Wales to recognise that clusters in their current format may distract attention from the real resourcing problems of General Practice, as the additional primary care funding that they have been allocated from Welsh Government may not increase GP practice resources. |
| 37 | Morgannwg | That conference welcomes the shift by Welsh Government in recognising that primary care must be at the centre of all NHS development and urges the minister and Health Boards to fully support and resource GPs to engage clusters to effectively deliver on this vital agenda. - <b>PASS</b>       |
| 38 | Morgannwg | That conference believes that the present QP templates that are required to be completed for the “Cluster Domain” are bureaucratic and open to claw back and should be scrapped. – <b>TAKEN AS A REFERENCE</b>  |

**Deanery and  
Training  
11.30 – 11.50**

**\*AC3**

**That conference calls on GPC Wales to work with Welsh Government and the Welsh Deanery to:**

- i. Increase the total number of GP training places in Wales -PASS**
- ii. Ensure the equitable distribution of those places across the various regions of Wales - PASS**
- iii. Ensure progress and action on a strategy for training more medical students in Wales - PASS**
- iv. Ensure progress and action on a strategy for training more GPs within Wales. - PASS**

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|----|-------------|--|
| 39 | North Wales | That conference calls on GPC Wales to work with Welsh Government and the Welsh Deanery<br>i. To increase the total number of GP training places in Wales.<br>ii. To ensure the equitable distribution of those places across the various regions of Wales. |
| 40 | Gwent       | That conference demands progress and action on a strategy for training more medical students in Wales.   |
| 41 | Gwent       | That conference demands progress and action on a strategy for training more GPs within Wales.  |

42 North Wales That conference calls on Welsh Government, the General Medical Council (GMC) and GPC Wales to enable doctors to spend 6-12 months in supervised standalone 'F3' posts in General Practice. - **PASS**

43 Morgannwg That conference believes doctors should have undertaken a minimum 4-month placement in General Practice by the completion of their foundation phase of training. - **PASS**

44 Morgannwg Morgannwg LMC is very concerned that the Swansea Medical School has reduced the resource to backfill those doctors/practices involved in teaching undergraduate medical students and that this will have a significant impact on the numbers able to provide placements. – **NOT REACHED**

**Themed Debate:  
GMS Contract  
11.50 – 12.20**

**Question: Independent contractor or salaried GP Service: Which is the Future model? **Independent contractor model confirmed as preferred Model****

45\* North Wales That conference believes that whatever the future models of General Practice, the good things about independent contractor status that make it efficient and effective should be cherished and built on. - **PASS**

46 Gwent That conference believes that independent contractor status needs a serious review and that a salaried service is fully considered and negotiated for provision of GP services.

**Secondary Care  
12.20 – 12.35**

47 Morgannwg That conference believes every patient:  
i. Should be able to see in 'real time' how long it will take until they receive an outpatient appointment  
ii. Should be able to directly request expedition without contacting their GP. - **PASS**

48 Bro Taf That conference calls on Welsh Government to confirm clinical responsibility is passed to secondary care, where delay in a patient being assessed in a clinically appropriate time frame, is caused by the failure of secondary care systems. - **PASS**



49 Morgannwg That conference deplores the incessant ‘buck passing’ of work by secondary care, as this creates unnecessary burden on primary care, and demands that Health Boards instruct all hospital doctors to:

- i. Make inter- and intra- departmental referrals rather than requesting the GP to do the referral.
- ii. Deal with all investigations initiated in hospital or at the barest minimum discuss with the GP before passing over the responsibility. - **PASS**

50 Morgannwg That conference asserts that the way some hospitals implement the current Individual Patient Funding Request (IPFR) Wales policy with regards to reconstructive surgery is not fit for purpose and needs to be urgently addressed. - **PASS**

**Enhanced  
Services  
12.35 – 12.45**

51 Morgannwg That conference calls for the mess around phlebotomy provision in Wales to be sorted once and for all with a nationwide Enhanced Service. - **PASS**

52 Morgannwg That conference insists that practices wishing to withdraw from provision of Enhanced Services are supported by Health Boards, given clear guidance on process and protected from unfair criticism levelled at them by colleagues ignorant of the pressure on GPs in 2016. - **PASS**

53 Morgannwg That conference calls on Health Boards to be transparent about their funding of Enhanced Services and to ensure that the Enhanced Service Floor of funding is met each financial year. - **PASS**

**LUNCH  
12.45 – 1.30**

**Ask the UK Negs  
1.30 – 2.00**

**Dispensing and  
Prescribing  
2.00 – 2.20**

54 Gwent That with the failure of the English Department of Health to move on adjusting reimbursement of dispensed drugs, Welsh

Government should consider direct negotiation with GPC Wales to avoid the nonsense of doctors dispensing drugs at a loss. - **PASS**

55 Morgannwg Conference believes that a significant amount of GP time is wasted in the requirement of GPs to prescribe stoma and other special appliances and demands that Welsh Government develops a centralised direct supply service. - **PASS**

56 Gwent That conference deplores the regular supply shortages seen with many commonly prescribed drugs and urges government to look again at the causes of these in order to ensure that they do not continue. - **PASS**

**Vaccinations and  
Immunisations  
2.20 – 2.40**

\*AC4

**That conference believes, in regard to the childhood Influenza programme:**

- i. Public Health Wales and Welsh Government must effectively communicate their plan and vision over the foreseeable future; so that practices and parents are not left guessing which children will be eligible year-on-year - **PASS****
- ii. Public Health Wales and Welsh Government must dramatically improve their awareness campaigns - **PASS****
- iii. Effective two-way communication between primary care and the School Nursing Service must develop, so that missed children can be recognised and vaccinated promptly and at a point in the influenza season when they still stand to benefit from vaccination. - **PASS****

57 Morgannwg That conference believes that Public Health Wales and Welsh Government effectively communicate their plan and vision for childhood influenza vaccination over the foreseeable future; so that practices and parents are not left guessing which children will be eligible year-on-year.

58 Morgannwg That conference supports the routine immunisation of children against influenza, but that in order for the programme to reach successful levels of uptake:

- i. Public Health Wales and Welsh Government must dramatically improve their awareness campaigns and

- ii. Effective two-way communication between Primary Care and the School Nursing Service must develop, so that missed children can be recognized and vaccinated promptly and at a point in the influenza season when they still stand to benefit from vaccination.

59 Morgannwg That conference recognises the primary role of GPs in delivering influenza vaccination and believes that for Welsh targets for uptake to be met requires a coordinated, early national awareness campaign, whilst also removing focus from vaccination within community pharmacies, which represents an expensive and poorly targeted service. -**PASS**

\*AC5

**That this conference calls on GPC Wales to ensure the community pharmacy contract for influenza**

- i. **Is subject to post payment verification checks on the categories of patients claimed for**
- ii. **Provides a transparent report on the cost effectiveness of the pharmacy flu vaccination service; and**
- iii. **If this does not demonstrate achievement of the original intended goals, insists the money provided is used on more evidence based cost effective primary care measures. - **PASS****

60 Bro Taf That this conference calls on GPC Wales to ensure in the community pharmacy contract for influenza **that vaccination** is subject to post payment verification checks on the categories of patients claimed for.

61 Bro Taf That conference demands that Welsh Government:

- i. Provides a transparent report on the cost effectiveness of the pharmacy flu vaccination service and,
- ii. If this does not demonstrate achievement of the original intended goals, insists the money provided is used on more evidence based cost effective primary care measures.

62\* Dyfed Powys **Suggests to the Welsh Government that despite including pharmacies in those who provide flu vaccinations, there has been no increase in uptake and that it should look at what other factors are affecting uptake. - **PASS****

63 Dyfed Powys Requests that Welsh Government audits the uptake of flu vaccination in pharmacies to assess if they are vaccinating

		previously unreachable patients or just offer offering an alternative service to those already being vaccinated by the medical practices.
64	Gwent	That conference demands that pharmacy and surgery delivery of flu vaccination should be complementary but operate from a level playing field.
65	Morgannwg	That conference believes that Hepatitis B immunisation should be extended to match the schedules in other developed countries. - <b>PASS</b>
66	Gwent	That the delivery of a good public health service to families, including the delivery of childhood immunisations, is the responsibility of GPs and Health Visitors alike. – <b>NOT REACHED</b>
67	Bro Taf	That conference calls on Welsh Government to alter the domain denominator following the exemption reporting of patients declining flu immunisation, as patients have a right to informed choice and GPs should not be penalised as a result. – <b>NOT REACHED</b>
68	Dyfed Powys	Reminds Public Health that staff in GP practices invest a lot of time and energy into contacting patients to attend for their flu vaccination and do not need continual advice about the need to contact patients. – <b>NOT REACHED</b>

**Welsh  
Government  
2.40 – 2.45**

*AC6		<b>That conference applauds the Welsh Government</b>
		<ul style="list-style-type: none"> <li><b>i. For announcing they do not intend to impose the new junior doctor contract.</b></li> <li><b>ii. For not following the misguided path taken in England in transferring public health services to impoverished Local Authorities. - PASS</b></li> </ul>
69	Gwent	That conference applauds the Welsh Government for announcing they do not intend to impose the new junior doctor contract.
70	Gwent	That conference congratulates the Welsh Government for not following the misguided path taken in England in transferring public health services to impoverished Local Authorities.

Finance and  
Expenses  
2.45 – 3.00

71	Morgannwg	That conference believes you ‘can’t get a quart out of a pint pot’ and that reducing the proportion of the budget going directly into GMS practices is a recipe for disaster in managing demand in a stretched NHS system. -PASS
72	Gwent	That conference urges governments in both Wales and Westminster to invest in primary care as the best way of maintaining a world class health service.
73	North Wales	That conference seeks that there is an immediate increase in financial resource to primary care to fairly reflect the rise in expenses that has occurred since 2004.
74*	Gwent	That where there is a predictable rise to specific GP expenses due to government action, Welsh Government should normally recognise this in full in the earnings and expenses uplift negotiated outside any general inflationary expenses rise. - PASS
75	Dyfed Powys	Urges the Welsh Government to acknowledge the impact of the introduction of the living wage will have on the wage bill for practices and provide assurances that there will be additional resources to protect the provision of service for patients.
76	Dyfed Powys	Advises the Welsh Government that unless additional funding is provided to practices to cover the implementation of the living wage, the provision of patient services will be affected.
77	Gwent	That conference demands the government takes action and supports practices with raising expenses which impacts on surgery viability against a backdrop of falling GP income.
78	Bro Taf	That conference calls on Welsh Government to ensure that there is uniform funding for all GP practices to provide core patient services in Wales.
79	Morgannwg	That conference calls upon Welsh Government to ensure that Health Boards do not offset their financial deficits or use Cluster Network funding, including under spends and slippage monies, for anything other than their intended purpose to deliver investment and services in primary care, particularly by tenuously labelling services from elsewhere as ‘primary care’. - PASS

80 North Wales That conference seeks that the DDRB recommendations on GMP pay are non-negotiable after evidence is submitted. – **TAKEN AS A REFERENCE**

**Appraisal and revalidation**  
**3.00 – 3.10**

81 North Wales That conference agrees that appraisal and revalidation are labour intensive and poorly evidence based. We call for both to be suspended pending review. - **LOST**

**Soapbox**  
**3.10 – 3.35**

**Tea**  
**3.35 – 3.45**

**Mental Health**  
**3.45 – 3.50**

82 Morgannwg That conference demands Welsh Government strengthen and improve the availability of appropriate services for those with all Mental Health problems in order to reduce the impact on patients and society as a whole. - **PASS**

**Indemnity**  
**3.50 – 4.00**

83\* Dyfed Powys **That conference urges Welsh Government, GPC, BMA and Medical Defence organisations to engage in a meaningful discussion about the escalating cost of medical defence subscriptions and look for strategies which will not exclude good doctors from practising medicine. -PASS**

84 North Wales That conference recognises that rising indemnity costs are a danger to the long term ability of GPs to provide daytime primary care. We ask GPC Wales and Welsh Government to find a solution to alleviate this situation with urgency.

85 Gwent That conference insists that Welsh Government have a strategy and takes action on supporting GPs with raising indemnity fees.

86 Bro Taf That conference requests the GPC to explore innovative solutions to the issue of rising indemnity costs including, but not confined to, the possibility of crown indemnity.

87 Gwent That Welsh Government should consider expanding the current Out of Hours (OOH) provision of Welsh risk pool indemnity to General Practice in hours.

**Medical  
Certification &  
Reports  
4.00 – 4.10**

88\* Morgannwg **Conference demands that Welsh Government reinforce previous guidance to local authorities and other public bodies that they should stop requesting medical certificates and GP letters to validate claimant's applications for services or other assistance. - PASS**

89 Morgannwg Conference demands that Welsh Government reviews its Welsh Water Assist Programme and restricts support to those who are connected via a water meter and limits the eligibility to those who have a significant medical condition.

90 Morgannwg That conference is appalled by the way many applicants for Disabled Parking badges are treated by Local Authorities and the deleterious effect this has on the patient's health and relationship with their GP.

**Premises  
4.10 – 4.20**

91 Morgannwg That conference calls on Welsh Government to consider purchasing back all GP premises at the market rate, to release rental funding and protect GPs from potential risk of bankruptcy in these challenging times. - **LOST**

92 Bro Taf That conference requests GPC to ensure that the current lease conditions used for primary care estates are altered to avoid practices incurring unreasonable financial strain. - **PASS**

93 Morgannwg Conference demands that Welsh Government recognise the contribution of GP's in developing premises to deliver high quality primary care and to ensure that Health Boards provide resources to maintain and develop existing and new GP premises. – **NOT REACHED**

**Health Boards  
4.20 – 4.35**

94	North Wales	That conference demands that resources and support poured into LHB managed practices should be equitably made available to Independent Contractor practices to prevent them from collapsing in the first place. - <b>PASS</b>
95	Dyfed Powys	Proposes that the Welsh Government establishes a Health Board specifically for primary care in Wales as the current LHB regime has its focus on sustaining hospital services. – <b>TAKEN AS A REFERENCE</b>
96*	Morgannwg	<b>That conference deplores the petty funding arguments at boundaries between Health Boards that adversely affect care and patient experience and insists that Health Boards should not restrict a GP’s ability to refer a patient to a specific service. -PASS</b>
97	Morgannwg	That conference calls upon Welsh Government and Health Boards to ensure there are genuine and effective processes to address cross-border issues, resolve senseless inconsistencies in services for patients of practices which straddle Health Board boundaries and eliminate unacceptable post code lotteries in health care.
98	Gwent	That Health Boards recognise that practice nurses were recruited from GP funds to manage primary care priorities – <b>NOT REACHED</b>
<b>Unscheduled Care 4.35 – 4.40</b>		
99	Morgannwg	Conference congratulates those GP’s who are involved in managing, developing and delivering Out of Hours (OOH) care and demands that Welsh Government ensures that in any change to the delivery of OOH care that Local GP’s are appropriately remunerated to ensure they remain engaged in OOH care. - <b>PASS</b>
<b>IM&amp;T 4.40 – 4.45</b>		
100	Gwent	That conference insists that Health Boards look at ways of insuring timely and valid response when significant events across the primary-secondary care interface are reported using e - DATIX or other mechanisms in order to allow closure of the significant event audit loop. - <b>PASS</b>
101	Morgannwg	That conference calls on NWIS to allow practices simple administrative rights to their computer systems and stop wasting the IT skills that exist in computer literate GP teams. – <b>NOT REACHED</b>



102 North Wales That conference insists that any IT solutions for access to Primary Care is an adjunct to the doctor patient relationship rather than a replacement. – **NOT REACHED**

**Access  
4.45 – 4.55**

103 Morgannwg That conference believes that GPs are quite capable of deciding which investigations are appropriate for their patients and should be allowed to request them without obstruction. -**PASS**

104 North Wales The GP crisis is now sadly established and with 20% of our scarce routine appointments being wasted, by patients not turning up. It is time to support fines for patients missing appointments for no good reason, to try and stem this wastage and the money raised going to support primary care. - **LOST**

105 Bro Taf That conference appeals to the Welsh Government to provide extra funding to tackle the problem of long waiting lists. - **LOST**

**Others  
4.55 – 5.00**

106 Morgannwg Conference calls on the Agenda Committee to review the present arrangements of the conference of Welsh LMCs. - **PASS**

107 Bro Taf That conference calls on GPC Wales to insist that the Public Services Ombudsman is not the correct body to advise on "compensation" amounts for patients or relatives and that its role should be confined to reviewing disputed cases and providing a verdict on whether or not to uphold a complaint. – **TAKEN AS A REFERENCE**

108 Gwent That conference is dismayed by the continued reports of delays in response times by the Welsh Ambulance Service. – **NOT REACHED**

109 Gwent That conference supports the wish of first language Welsh speaking patients who live in their own country to speak Welsh to their health professionals where at all possible. – **NOT REACHED**

110 Bro Taf That conference demands that GPC continues to raise the issue of the iniquity and clinical risk associated with the lack of the sharing of clinical information concerning patients with positive HIV status, with the aim of achieving a mandatory change in the current accepted practice. –**NOT REACHED**

## And Finally....

111 Morgannwg That conference calls on David Cameron to henceforth describe Offa's Dyke as the 'line between collaboration and privatisation'. -  
**PASS**

## Motions not for debate

112 Dyfed Powys Requests that Welsh Government undertakes a comprehensive review of the flu immunisation campaign to assess.

113 Gwent Conference believes that Welsh Government should review the English Junior Doctor Contract when agreement has been reached to ascertain if there are any positive points that Wales should consider.

114 Morgannwg That conference supports the focus on increasing availability of Ambulatory Emergency Care for suitable patients in secondary care.

115 Gwent That conference believes that austerity as a policy is mainly a way of transferring resources from the most needy to the most well-off and has no place in the management of a fair and equitable society, in particular when this is used as an excuse to emasculate Health and Social Services.

## 'A' Motions

116 Gwent That conference reiterates in no uncertain terms that the hurricane of GP workforce crisis is landing on our shores and despite the failure of acknowledgment of the early warning system that Welsh Government now puts action at the forefront ahead of rhetoric.

117 Morgannwg That conference insists that Welsh Government leads a wholesale review with Health Boards of health care priorities to include a review of the proportion of the health budget spent on primary care and to address the fundamental inconsistencies of Health Boards in prioritising the use of scarce health resources.

118 Morgannwg That conference demands that Welsh Government intervene to address, once and for all, the scandalous ongoing risk to patients posed by absent, delayed and poor quality discharge information.

119 Bro Taf That conference requests GPC Wales to negotiate a mechanism which will ensure that funding follows the flow of work from secondary to primary care.

120	Gwent	That conference supports a fully funded and accessible occupational health service for GPs and their staff regardless of their contractual status.
121	Gwent	That Conference congratulates Healthcare Inspectorate Wales on its proportionate response in carrying out inspections in General Practices in Wales and its avoidance of the excesses of the English CQC.

